

Past Performance Questionnaire

Scoring Plan:

10 – 9 (91% - 100% of the time)
8 - 7 (81% - 90% of the time)
6 - 5 (71% - 80% of the time)
4 - 2 (60% - 70% of the time)
1 - 0 (59% of the time or less)
N/A (Not applicable)

OVERALL SCORE: _____

A: Quality of Product or Service

1. To what extent did the contractor's products or services meet the terms of the contract?

Score:

Comments:

2. To what extent were the contractor's products technically accurate and correct?

Score:

Comments:

B: Timeliness

3. To what extent did the contractor adhere to deliverable schedules?

Score:

Comments:

4. To what extent were any delays outside the contractor's control?

Score:

Comments:

5. To what extent did the contractor take measures to minimize delays?

Score:

Comments:

C: Cost Control

6. To what extent did the contractor adhere to target costs?

Score:

Comments:

7. To what extent did the contractor implement cost control measures?

Score:

Comments:

8. To what extent were cost overruns and change proposals reasonably priced and adequately substantiated?

Score:

Comments:

9. To what extent were any cost overruns beyond the contractor's control?

Score:

Comments:

10. To what extent did the contractor adhere to ceiling rates, if applicable?

Score:

(If there were ceiling rates, what were they, and what were they applied to?)

Comments:

D: Effective Management

11. To what extent were invoice submissions current, accurate and complete?

Score:

Comments:

12. To what extent did the contractor effectively allocate available resources to meet customer needs?

Score:

Comments:

13. To what extent did the contractor effectively allocate personnel to meet customer needs?

Score:

Comments:

14. To what extent were contractor staff readily available on short notice, for quick response assignments?

Score:

Comments:

15. If applicable, to what extent did the contractor effectively manage subcontracts and consultants?

Score:

Comments:

16. To what extent did the contractor effectively interface with government personnel to address requests, complaints, and inquiries?

Score:

Comments:

Respondent Information:
Name:

Address and Phone:

Role in management of Contract:

Contractor Information

Contractor Name	
Contract Number	
Type of Requirement (Supplies/Services)	
Type of Contract	
Competitive Award	Circle: Yes No
Any significant contract changes?	Please explain in space below:

Contract Cost

Contract Value	Initial Amount	Current Amount
Estimated Cost		
Fixed Price		
Fee/Profit		
Total Value:		